

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 150

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PERDUE VICTORY INC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BLANCHARD, JAMES, H, MR,**

Mailing Address 6001 RIVER RD  
 STE 100

City  
 COLUMBUS

State  
 GA

Zip Code  
 31904

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12800.00

Date of Receipt

**03** / **17** / **2020**

**Transaction ID : SA11AI.13590**

Amount of Each Receipt this Period

12800.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BLOHM, CAROLYN, A, ,**

Mailing Address 237 FALLIGANT AVE

City  
 SAVANNAH

State  
 GA

Zip Code  
 31410

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 THE GEORGIA CENTER FOR REPRODUCTIVE ME

Occupation (for Individual)  
 OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **31** / **2020**

**Transaction ID : SA11AI.13673**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BLOHM, PATRICK, LE ROY, ,**

Mailing Address 237 FALLIGANT AVE

City  
 SAVANNAH

State  
 GA

Zip Code  
 31410

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 THE GEORGIA CENTER FOR REPRODUCTIVE ME

Occupation (for Individual)  
 PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **31** / **2020**

**Transaction ID : SA11AI.13675**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

17800.00